PTO/SB/17 (02-07)
Approved for use through 02/28/2007. OMB 0651-0032
U.S. Palent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Pap	erwork Reduction	Act of 19	95, no person are re	spond to a collectio	and to a collection of information unless it displays a valid OMB control number				
Effective on 12/08/2004					Complete if Known				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H R. 4818)							10/809,088-Conf. #7665		
FEE TRANSMITTAL					Filing Date				
For FY 2007							Alexander TORONE		
					0000		S. Memula		
Applicant claims small entity status See 37 CFR 1 27					741 0/14		2825 5486-0125PUS1		
TOTAL AMOUNT OF PAYMENT (\$) 910.00					Attorney Docket No. 5486-012			51	
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order Other (please identify):									
x Deposit Account Deposit Account Number 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
x Charge fee(s) indicated below Charge fee(s) indicated below. except for the filing fee									
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17									
FEE CALCULATION									
1. BASIC FILING, SEARCH, AND EXAMINATION FEES									
FILING FEES SEARCH FEES EXAMINATION FEES Small Entity Small Entity Small Entity									
Application Ty	<u>pe</u>	Fee (\$)	Fee (\$)	Fee (\$)		Fee (\$)		Fees	Paid (\$)
Utility		300	150	500	250	200	100		
Design		200	100	100	50	130	65		
Plant		200	100	300	150	160	80		
Reissue		300	150	500	250	600	300		
Provisional		200	100	0	0	0	0		
2 EXCESS CLAIM FEES Small Entity									
Fee DescriptionFee (\$)Fee (\$)Each claim over 20 (including Reissues)5025									
Each independent claim over 3 (including Reissues) 200 100									100
Multiple dependent claims 360 1									180
Total Claims Extra Claims Fee (\$) Fee F					'aid (\$) <u>Mu</u>		ultiple Dependent Claims		
18 - 18 = x = Fee (\$) HP = highest number of total claims paid for, if greater than 20								Fee Paid (<u>5)</u>
Indep. Claims	Extra Cla	ilms	Fee (\$)	Fee P	ald (\$)				
4 -4 = x = HP = highest number of independent claims paid for if greater than 3									
3. APPLICATION SIZE FEE									
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1 52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50									
sheets or fraction thereof See 35 U S C 41(a)(1)(G) and 37 CFR 1 16(s) Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)									
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)									
4. OTHER FEE(S) Fees Paid (\$)									
Non-English Specification. \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 790 00 1251 Extension for response within first month 120.00									
SUBMITTED BY									
Signature	904	171	L #47.	305	Registration No (Altomey/Agent)	29,680	Telephone	(703) 20	5-8000
Name (Print/Type)	Michael K I	Viutter			e attractive Methy		Date	April 16	, 2007
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